

Strategic Goal 3

Honor and serve veterans in life and memorialize them in death for their sacrifices on behalf of the Nation

Objective 3.1

Improve the overall health of enrolled veterans including special populations of veterans through a health care system characterized by convenient access, high quality, satisfied patients, and cost efficiency

Objective 3.2

Provide a level of income that brings eligible veterans and their survivors up to a standard of living that assures dignity in their lives



Objective 3.3

Enhance the financial security for veterans' families through life insurance and other benefits programs

Objective 3.4

Ensure that the burial needs of veterans and eligible family members are met

Objective 3.5

Provide veterans and their families with symbolic expressions of remembrance

***To honor
and serve
veterans...***

Veterans will have dignity in their lives, especially in time of need, through the provision of health care, pension programs and life insurance, and the Nation will memorialize them in death for the sacrifices they have made for their country. VA will achieve this goal by improving the overall health of enrolled veterans, and providing a continuum of health care for these and other special populations of veterans. VA will also provide life insurance benefits to veterans, ensure that burial need of veterans and eligible family members are met, and provide veterans and their families with symbolic expressions of remembrance.

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Purpose and Outcomes:

The purpose of this objective is to provide health care for all enrolled veterans through the application of monitors and measures that demonstrate achievement of performance targets. Access will be improved by focusing on timeliness of service delivery and treating veterans closer to their homes. Quality of care will be improved by improving the process for measuring and reporting outcomes of care, enhancing the safety of the care environment for patients and employees, and focusing on the health care needs of special populations. Patient and employee satisfaction will be closely monitored to ensure that services meet expectations. Costs will be monitored to ensure that taxpayers receive the best return for their dollars.

Strategies and Processes:

VA will pursue a number of strategies to achieve this objective.

Access and Service Delivery

VA will increase the timeliness of services for veterans and their families by focusing on the new 30-30-20 performance goals. These goals will improve access to care by decreasing waiting times for primary care appointments to 30 days, waiting times for specialty appointments to 30 days, and waiting times to see a provider to 20 minutes. Through these goals, VA can optimize process cycle times and access to services and model itself after world class organizations.

In addition, VA has incorporated the measures that call for reducing the waiting time for

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specialty clinics and primary care appointments to 30 days or less into the performance agreements between Network Directors and the Under Secretary for Health. This will help to ensure a concerted effort across the VA health care system. More specific strategies designed to improve overall access include the following service delivery strategies:

- Provide more timely access to care and services by hiring additional staff in critical areas.
- Improve work and work processes through the continuation of the Institute for Health care Improvement initiatives and other process improvement efforts.
- Improve timeliness of access to specialty services through the procurement of short-term contracts with specialists to provide services to veterans that have been waiting for a significant period of time.
- Renovate infrastructure in existing facilities to ensure that examination rooms are available for those providing services on a given day.
- Address Millenium Act requirements for access to long-term care.
- Provide improved and more convenient access for patients through the opening of more Community Based Outpatient Clinics (CBOCs).

Patients increasingly seek and receive VA care at multiple sites. They may receive primary care at community-based outpatient clinics and specialty or inpatient care at one or more medical centers. Timely access to clinical information by VA staff

from multiple sites of care is paramount to ensure prompt service, continuity, and quality care. In addition, providers need a more efficient means to document care. Telemedicine can improve timeliness and quality of care for veterans, maximizing remote provider consultation.

A key VA strategy is to use technology to improve access to patient information across sites of care. The result will be enhanced communication across sites of care within each VA medical center, between facilities within a VISN, and between VISNs. In addition, VA is actively exploring additional innovative information technology contributions to VA health care services.

Quality of Care

VA will continue emphasizing the use of Clinical Practice Guidelines throughout the health care system to guide measurement and reporting of outcomes of care for major clinical areas such as heart disease, diabetes, major depressive disorder, and hypertension. In addition to the use of Clinical Practice Guidelines, VA's Prevention Index is being revised to accommodate additional measures. The Prevention Index consists of clinical interventions that measure how well VA follows nationally recognized primary prevention and early detection recommendations for diseases with major social consequences such as influenza and pneumococcal diseases, tobacco and alcohol consumption, and numerous cancers.

To provide for a safe environment, VA will identify key drivers of the patient safety culture in VA medical facilities through surveys focused on improving the culture. The success of the strategy calling for continuous improvements in the safety of VA health care will depend on development of a system to monitor both safety-related events and the culture of safety within VA medical facilities. The special care needs of veterans will be met by developing outcome-oriented measures and by focusing on

positive outcomes for certain sub-groups.

The Chaplain will work with VA Administrations and staff offices to enhance communications and collaboration among VA's programs and activities that respond to the spiritual needs of veterans and their families.

VA will also review data on the use of its facilities by women veterans, enrollment data on women veterans by eligibility category, and findings of VA utilization research and satisfaction surveys to determine trends in use of VA programs by women veterans. Following this review, site visits will be conducted at selected VISNs and SDNs to identify programmatic initiatives that successfully increase women veterans use of VA.

The Homeless Veterans Program Office will work with VA Administrations and staff offices to enhance communication, collaboration and coordination of VA-wide programs and activities to address the needs of homeless veterans. This office will act as a liaison to other federal agencies, state and local governments, Veterans Service Organizations and non-profit organizations serving homeless veterans and conduct outreach activities that will promote partnerships to expand the range of services for homeless veterans.

VA will work to maximize participation in the Community Homelessness Assessment Local Education and Networking Groups (CHALENG) by increasing VA facility participation. VA will coordinate outreach activities to enhance community participation in local CHALENG planning meetings.

Service Delivery Expectations

VA obtains continual feedback from the general veteran population on their satisfaction with service through surveys, focus groups, complaint handling, direct inquiry, and comment cards. This feedback

is used to build a database on what veterans expect and provides information that can be used to revise performance goals and identify areas for improvement. As appropriate, specific groups of veterans — such as Gulf War veterans, minority veterans, and women veterans — are surveyed to determine their special needs and to achieve world-class service. VA health care providers are expected to provide compassionate service, to share decision-making with patients, and to empathize accurately with patients concerns.

Costs

Consolidation and integration are undertaken to eliminate redundancy, improve economies of scale, and bring service levels and/or workload up to minimum levels to assure cost effectiveness and clinical quality. Restructuring addresses consolidation, integration, right-sizing of facilities, and realignment of services and programs within facilities. These realignment issues are currently being addressed within the context of the CARES initiative. VA has achieved a significant decrease in the number of operating beds nationwide as a result of these activities and plans to continue decreasing operating beds in the future.

Crosscutting Efforts in Health Care

VA has a vast number of sharing agreements with the DoD that result in both increased access to, and quality of, medical care for veterans. Many of these collaborative partnerships result in increased levels of care for many of VA's most important subgroups of patients, including veterans with spinal cord injury, acute traumatic brain injury, Gulf War illnesses, and those in need of prosthetic services.

VA collaborates with DHHS to develop non-VA benchmarks for bed-days of care which are obtained from a HCFA database. VA is able to obtain data on ambulatory procedures from the

National Center for Health Statistics. VA and DoD collaborate on enhancing VA's Parametric Automated Cost Engineering System (VA PACES), on partnering on real property assets, and on acquisition and collocation of VA facilities with excess property available through the closure of military bases. VA also participates in joint design and construction projected with the Department of Agriculture, Indian Health Service, National Park Service, and Merchant Marine Academy.

Other crosscutting activities include providing laundry services to State Veterans home and Job Corps programs, collaborating with GSA in a Government-wide Real Property Information Sharing program on utilization of government-owned and government-controlled property in the Northeastern area of the United States, and acquiring leasehold interests in real property for clinical and administrative purposes within various regions across the United States. VA also participates with a private sector panel to identify enhanced-use lease initiatives at various VA medical centers for the purpose of obtaining lower cost utilities and energy services thus making more resources available for direct patient care.

External Factors:

- The strategy to ensure a consistent delivery of health care by implementing standard measures depends upon contracted reviews by the External Peer Review Program.
- The continued participation of DoD in jointly developing and implementing clinical practice guidelines with a long range view toward assuring continuity of care and a seamless transition for a patient moving from one system to the other.
- Enactment of legislation authorizing VA to bill Medicare for health care provided to certain veterans.

Objective 3.1 Performance Measure (Outcomes)		FY 2005 Performance Targets
Women Veterans ó	Increase the number of women veterans accessing VA health care services on an annual basis.	TBD
Long-Term Care ó	VA will increase access to home and community-based care for enrolled veterans when clinically indicated	55,000
Clinical Practice Guidelines ó	Increase the use of clinical practice guidelines	TBD
Prevention Index ó	Increase the scores on the Prevention Index	TBD
Quality of Health Care Service ó	Increase the percent of customers rating VA health care service as very good or excellent	72%
Safety ó	Improve the culture of patient safety in VA medical centers	TBD
Spiritual Counseling ó	Increase the number of spiritual counseling sessions conducted with veterans	TBD
Homeless Veterans ó	Increase beds available to homeless veterans through VA's Homeless Grant & Per Diem Program	2,500
Service Delivery Measures		FY 2005 Performance Targets
Customer Feedback --	Reduce the average percent of problems reported in the annual outpatient customer feedback survey	TBD
Access and Service Delivery ó	Increase the percent of patients, when referred by a VA primary care practitioner, who will be able to obtain a non-urgent appointment with a specialist within 30 days of the date of referral	90%
	Increase the percent of enrolled veterans who will be able to schedule an initial, new patient appointment with their primary care team within 30 days	90%
	Increase the percent of patients with scheduled appointments at VA health care facilities who are seen within 20 minutes of their appointments	80%
Outpatient Services ó	Expand the number of community-based outpatient clinics where veterans can receive outpatient healthcare	659 by FY 2003

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Purpose and Outcomes:

The purpose of the Pension Program is to provide monthly payments, as specified by law, to needy wartime veterans who are permanently disabled as a result of disability not related to military services. The pension program also provides monthly payments, as specified by law, to needy surviving spouses and dependent children of deceased wartime veterans. The outcomes for these monetary payments of pension benefits are to:

- Recognize and compensate veterans and their survivors for the contributions and sacrifices made in defense of the nation during wartime;
- Provide a level of income that brings veterans and their survivors up to a standard of living that ensures a basic dignity in their lives; and
- Provide incentive for future military service by assuring prospective servicemembers of the nation's obligation to provide for those who defend the country in wartime military service.

Strategies and Processes:

VA will implement the following strategies to ensure veterans and their survivors have a standard of living that provides for basic dignity in their lives and the delivery of world-class service to wartime veterans:

*Objective 3.2
Provide a level of income that brings eligible veterans and their survivors up to a standard of living that assures dignity in their lives*

- VA will provide veterans and survivors with easy access to information and the opportunity to interact with the VA for benefits and services, at a convenient time and place.

- VA will simplify the administrative rules and regulations governing the application and eligibility determination processes.

- VA will maximize direct contact with the veteran and survivors through the *case management* approach and through the use of information technology and improving workforce skills. These

improvements will result in improved veteran-customer satisfaction, improved cycle time for claims process and improved accuracy.

- VA will identify outcome indicators for the Pension Programs and determine baseline measures through program evaluations, program reviews, a consultative process with stakeholders and other means that determine results of the Pension Programs.

External Factors:

- Legislation — Legislation may be required to achieve anticipated program outcomes.

Objective 3.2 Performance Measure (Outcomes)		FY 2005 Performance Targets
Pension	Percent of wartime veterans who believe they are appropriately recognized and compensated for their sacrifices in defense of the nation.	TBD
Veterans and Survivors	Percent of veterans and their survivors who believe they are provided a level of income that allows them to maintain a standard of living and ensures a basic dignity in their lives.	TBD
Service Delivery Measures (See Objective 2.1)		FY 2005 Performance Targets

Service delivery performance measures (i.e., speed, accuracy and customer satisfaction) are measured for the entire Compensation, DIC and Pension Programs. These measures are an aggregate and not separated by individual program. Therefore, the service delivery measures for the Pension Programs (objective 3.2) are identical to the measures for the Compensation Program (objective 1.2).

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Purpose and Outcomes:

The outcomes or purpose of the VA Insurance Programs are to offer financial security to the veterans and their families through life insurance coverage and options to veterans and servicemembers that are competitive and comparable to healthy individuals and those who did not have military service. The four insurance programs available are:

- Service Disabled Veterans Insurance (S-DVI) – Providing insurance and services to disabled veterans;
- Servicemembers Group Life Insurance (SGLI) – Providing insurance coverage and services to active duty and reserve members of the uniformed services;
- Veterans Group Life Insurance (VGLI) — Providing term insurance options to veterans transitioning from active duty (SGLI) to veterans; and
- Veterans Mortgage Life Insurance (VMLI) — Providing mortgage life insurance to severely disabled veterans.

The outcomes for the VA Insurance Programs are to:

- Enable disabled veterans to obtain life insurance at standard premium rates regardless of their service-connected disability (S-DVI).
- Enable active duty and reserve members of the uniformed services to obtain life insurance at competitive rates and comparable options (SGLI).
 - Enable veterans to obtain life insurance coverage at

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Enhance the financial security for veterans' families through life insurance and other benefits programs*

competitive rates and comparable options through conversion of SGLI (VGLI).

- Enable severely disabled veterans to obtain mortgage life insurance coverage at standard premium rates (VMLI).

Strategies and Processes:

VA will implement the following strategies to assist active duty members, reservists and veterans to

obtain and maintain life insurance coverage and benefits and receive world-class service:

- VA will provide veterans with easy access to information and the opportunity to interact with VA for benefits and services, at a convenient time and place.
- VA will simplify the administrative rules and regulations governing the application and eligibility determination processes.
- VA will maximize direct contact with the veteran through the case management approach and through the use of information technology and improving workforce skills. These improvements will result in improved veteran-customer satisfaction, improved cycle time and improved accuracy.
- VA will build or enhance partnerships with DoD and other organizations to improve interactions with veterans, servicemembers and beneficiaries.
- VA will inform servicemembers of insurance benefits and services as they enter duty and as they transition to civilian life.
- VA will identify and validate outcome measures for the program and determine baseline measures through program

evaluations, program reviews, a consultative process with stakeholders and other means that determine results of Insurance Program.

External Factors:

- **Legislation** — Legislation may be required to achieve anticipated program outcomes. Continuing to keep pace with insurance values and policy features will require legislation.

Objective 3.3 Performance Measure (Outcomes)		FY 2005 Performance Targets
VMLI	Parity with the average American's ability to purchase mortgage life insurance at competitive rates and with comparable policy features	100%
S-DVI	Parity with the average American's ability to purchase life insurance at competitive rates and with comparable policy features	100%
SGVI/VGLI	Parity with the average American's ability to purchase life insurance at competitive rates and with comparable policy features	TBD
Service Delivery Measures		FY 2005 Performance Targets
Insurance	Blocked Call Average Hold (seconds)	4% 20 seconds
Customer Satisfaction	Receive high veteran satisfaction rating for services delivered	95%
Accuracy	Accuracy of insurance disbursements	99%
Timeliness	Average days to process disbursements	3 days
Telephone	Blocked Call Rate	1%
	Average Hold Time	20 seconds

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Purpose and Outcomes:

The purpose of this program is to ensure that the burial needs of our Nation's veterans and eligible family members are met.

Strategies and Processes:

To achieve this objective, VA will:

- (1) increase access by establishing additional national cemeteries in unserved areas;
- (2) expand existing national cemeteries to continue to provide service to meet projected demand, including the development of columbaria and the acquisition of additional land; and
- (3) develop alternative burial options consistent with veterans' expectations.

VA will also pursue the following more specific strategies to achieve this objective:

- Two new national cemeteries near Dallas/Fort Worth, Texas and Cleveland, Ohio will be opened in FY 2000. In 1999, VA opened Saratoga National Cemetery in New York, and Abraham Lincoln National Cemetery in Illinois.
- VA is planning for the development of new national cemeteries to serve veterans in the areas of Atlanta, Georgia; Detroit, Michigan; Ft. Sill, Oklahoma; Miami, Florida; Pittsburgh, Pennsylvania; and Sacramento, California. These locations were identified in the 1987 and 1994 Reports to Congress.
- VA will expand existing national cemeteries by completing phased development projects in order to make additional gravesites and/or columbaria available for interments.
- National cemeteries that will close due to depletion of grave space will be identified to

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Ensure that the burial
needs of veterans and
eligible family members
are met*

determine the feasibility of extending the service period of a cemetery by the acquisition of adjacent or contiguous land, or by the construction of columbaria.

- State veterans cemeteries will be established or expanded to complement VA's system of national cemeteries. VA administers the State Cemetery Grants Program (SCGP), which provides grants to states of up to 100 percent of the cost of establishing, expanding, or improving state veterans cemeteries, including the acquisition of initial operating equipment. These cemeteries may be located by the states in areas where there are no plans for VA to operate and maintain a national cemetery; or where a national cemetery is projected to close, in order to provide uninterrupted service.
- VA will also continue to provide high-quality, responsive service in all contacts with veterans, their families and friends, and other visitors. These contacts include scheduling the interments, greeting the corteges and bereaved families for the committal services, and providing information about the cemetery and the location of specific graves.
- While VA does not provide military honors, national cemeteries facilitate the provision of military honors and provide logistical support to military honors teams. VA also works closely with components of DoD and veterans service organizations to provide military honors at national cemeteries.
- VA will continue to obtain feedback from veterans, their families, and other customers to ascertain how they perceive the quality of service provided. Using a Visitor Comment

Card, VA is able to measure success in delivering service with courtesy, compassion, and respect. The information gathered is used in VA's strategic planning process to develop additional strategies for improving service.

- To accommodate and better serve customers, VA has developed three hub cemeteries to provide weekend scheduling of an interment in a national cemetery for a specific time in the ensuing week. One hub cemetery is located in each of NCA's three primary geographic areas to provide weekend scheduling to families and funeral directors.
- To further enhance access to information, VA will continue to install user-operated kiosks to provide automated gravesite locator information. These kiosks provide an easy-to-use vehicle for locating gravesites both on weekdays and weekends, particularly outside normal business hours when cemetery staff are not available. Although these kiosks are used primarily for locating gravesites, they also provide other information regarding VA services such as eligibility requirements,

headstone and marker ordering information, customer service standards, floral regulations, and information for grief and bereavement interventions for families

External Factors:

- VA has established partnerships with states to provide veterans and their eligible family members with burial options. It is difficult to project future activity for this program because requests for grants are generated from individual states. A state must enact legislation to commit funding to a project that will serve a clearly defined population and require state funds for maintenance in perpetuity.
- Veterans and their families may experience feelings of dissatisfaction when their expectations concerning the committal service (including military honors) are not met. Dissatisfaction with services provided by the DoD (military honors) or the funeral home can adversely affect the public's perceptions regarding the quality of VA service.

Objective 3.4 Performance Measure (Outcomes)		FY 2005 Performance Targets
Percentage of Veterans Served	Increase the percentage of veterans served by a burial option in a national or state veterans cemetery within a reasonable distance (75 miles) of their residence	82%
Access to Burial Option in a State Veterans Cemetery	Increase the number of veterans who have access to a burial option in a state veterans cemetery	3,503,000
Quality of Service	Increase the percentage of respondents who rate service provided by the national cemeteries as excellent	100%
Kiosks	cummulative number of kiosks installed at national cemeteries	64

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Purpose and Outcomes:

The purpose of this objective is to provide symbolic expressions of remembrance, recognizing the sacrifices of our Nation's veterans and their families.

Strategies and Processes:

VA will continue to provide headstones and markers for the graves of eligible persons in national, state, other public and private cemeteries. In addition, VA will continue to ensure Presidential Memorial Certificates are delivered accurately and timely. A Presidential Memorial Certificate conveys to the family of the veteran the gratitude of the Nation for the veteran's service. To convey this gratitude, it is essential that the certificate be accurately inscribed. VA also provides American flags to drape the caskets of eligible veterans. Delivery of these benefits is not dependent on interment in a national cemetery.

VA's chaplain service will be available to conduct regular memorial services for families in VHA

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Provide veterans and their families with symbolic expressions of remembrance*

facilities and at national cemeteries when desired by the families.

VA will improve accuracy and operational processes, reducing the number of inaccurate or damaged headstones and markers delivered to cemeteries.

VA will use, to the maximum extent possible, modern information technology to automate its operational processes. On-line ordering using VA's Automated Monument Application System – Redesign (AMAS-R) and electronic transmission of headstone and marker orders to contractors are improvements that increase the efficiency of the headstone and marker ordering process.

External Factors:

Headstones and markers are supplied and delivered by outside contractors throughout the U.S. The performance of these contractors greatly affects the quality of service provided to veterans and their families.

	Objective 3.5 Performance Measure (Outcomes)	FY 2005 Performance Targets
Headstones and Markers 6	Increase the percentage of headstones and markers that are undamaged and correctly inscribed	98%
Electronic Transfer of Information 6	Increase the percentage of headstones and markers ordered on-line by other federal and state veterans cemeteries using AMAS-R	95%
	Increase the percentage of individual headstone and marker orders transmitted electronically to contractors	95%
Accurate Inscription 6	Provide Presidential Memorial Certificates that are accurately inscribed	98%